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| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number (Optional) 6286P001 |
| | | Confirmation Number (Optional) 2584 |
| I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Appeal Brief-Patents, Commissioner for Patents, P.O. Box 1450, Alexandria, VA <div style="text-align: right;">February 4, 2010</div> | | |
| In re Application of Alden J. Blowers | | |
| Application Number 10/678,326 | | Filed 10/03/2003 |
| For: METHOD FOR PROVIDING COMPREHENSIVE ACH PAYROLL VENDOR SERVICES | | |
| Signature <u><i>Melissa Stead</i></u> | Art Unit 3693 | Examiner Paul W. Shumate |
| Typed or printed name <u>Melissa Stead</u> | | |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. | | |
| The fee for this Notice of Appeal is (37 CFR 1.17(b)) | | <u>\$540.00</u> |
| <input checked="" type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: | | <u>\$270.00</u> |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2666</u> . | | |
| <input checked="" type="checkbox"/> Per MPEP 1204.01, any previously paid appeal fees set forth in 37 CFR 41.20 for filing a notice of appeal will be applied to the new appeal in the same application as long as a final Board decision has not been made on the prior appeal. In accordance with MPEP, 1204.01, The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2666</u> . | | |
| <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. | | |
| I am the | | |
| <input type="checkbox"/> applicant/inventor. | | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | |
| <input checked="" type="checkbox"/> attorney or agent of record. | | |
| <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). <small>Registration number if action under 37 CFR 1.34(a)</small> | | |
| | | <u><i>Jonathan S. Miller</i></u> Signature |
| | | <u>Jonathan S. Miller, Reg. No. 48,534</u> Typed or printed name |
| | | <u>02/04/10</u> Date |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.* | | |
| <input type="checkbox"/> *Total of _____ forms are submitted. | | |